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DIVISION OF ADULT INSTITUTIONS

POLICY AND PROCEDURES

| OC-1024 (N | OC-1024 (Nev. 02/2009) | | | | |
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| OF WISCOME | | DAI Policy #: 500.20.02 | Page 1 of 7 | | |
| | DIVISION OF ADULT INSTITUTIONS POLICY AND | Original Effective Date: | New Effective Date: | | |
| | | 02/15/04 | 04/20/2018 | | |
| | | Supersedes: 500.20.02 | Dated: 11/28/12 | | |
| | | Administrator's Approval: Jim Schwochert, Administrator | | | |
| | PROCEDURES | Required Posting or Restricted: | | | |
| | | Inmate X All Staf | f Restricted | | |
| Chapter: | 500 Health Services | | | | |
| Subject: | Employee Hepatitis B Vac | cination Program | | | |

POLICY

The Department of Corrections will offer employees in the Division of Adult Institutions and the Division of Juvenile Corrections, Hepatitis B vaccine based upon current guidelines from the Centers for Disease Control, Division of Public Health Services and the Bureau of Health Services Department of Corrections. Employees in the Division of Community Corrections will be offered Hepatitis B vaccine on a voluntary basis through Employee Health.

REFERENCES

OSHA 29 CFR 1910.1030, Occupational Exposure to Bloodborne Pathogens Epidemiology and Prevention of Vaccine Preventable Diseases, 12 Edition, January 2006

2011 CURRENT Medical Diagnosis & Treatment, change to 50th Edition (2011) McPhee, S. J. and Papadakis, M. A. McGraw Hill . pp. 644-653 and 1255-1259 CURRENT Medical Diagnosis & Treatment, 45th Edition, 2006, L. M. Tierney, Jr. MD. Editor

CDC, Hepatitis B Vaccine Information Statement (VIS)

Health Services Nursing Protocol, Allergic Reaction – Employee Health

Bureau of Health Services Allergic Reactions Protocol

Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2008, P-B-01, Infection Control Program

Standards for Health Services in Juvenile Detention and Confinement Facilities National Commission on Correctional Health Care, 2004, Y-B-01, Infection Control Program

Hepatitis B and the Health Care Worker – Immunization Action Coalition Hepatitis B Vaccine: Fact Sheet – VIS

DEFINITIONS, ACRONYMS AND FORMS

Advanced Care Provider (ACP) – Provider with prescriptive authority.

BHS – Bureau of Health Services

CDC – Centers for Disease Control

CXR – Chest x-ray

DAI – Division of Adult Institutions

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DCC - Division of Community Corrections

DJC - Division of Juvenile Corrections

DOC – Department of Corrections

<u>DOC-3368</u> – Employee Hepatitis B Vaccine Consent

<u>DOC-3369</u> – Employee Medical History (Hepatitis Vaccine) – Confidential

DOC-3458 – Employee Hepatitis B Vaccine Status

EHN – Employee Health Nurse

<u>Facility Employees</u> – Full-time, p[art-time, Corrections Training Center Preservice employees, Limited Term Employees, Interns paid by DOC and DJC Foster Grandparent employees working in facilities

<u>HCW</u> – <u>Health Care Worker</u> – RN, LPN, CNA, MPAA, MPA, PA, NP, OT, RT, PT, Physicians, Dentists, Dental Assistants & Hygienists

HBV - Hepatitis B virus

IM – Intramuscular

MDI – Metered dose inhaler

mg. - Milligrams

ml. – Milliliter

OSHA – Occupational Safety and Health Administration

PO – By mouth (per os)

SQ - Subcutaneous

VIS – Vaccine Information Statement

PROCEDURES

I. Eligibility for Vaccine

A. OSHA, 29 CFR 1910.1030, requires that employers must make available the Hepatitis B vaccine to all employees who may have a reasonable possibility of exposure to blood or certain other body fluids.

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- B. Hepatitis B vaccine shall be offered to all employees who are designated as occupationally exposed by the DOC. (those who work in institutions, centers or schools).
- C. Hepatitis B vaccine is available to employees on a voluntary basis for those who are not occupationally exposed.
- D. Contracted staff is not eligible for the Hepatitis B vaccine through the DOC.
- E. WRC Security employees are employed by the DOC and are eligible for the Hepatitis B vaccine through the DOC.

II. Equipment Needed for Vaccine Administration

- A. Syringes and needles.
- B. Sharps container.
- C. Alcohol wipes.
- D. Adhesive bandages.
- E. 2x2s.
- F. Hepatitis B vaccine.
- G. EpiPen Autoinjector or Epinephrine 1:1000 (aqueous) per Allergic Reaction Nursing Protocol Employee Health Protocol.
- H. Albuterol inhalers (MDI 2 puffs for bronchospasm) per Allergic Reaction Nursing Protocol Employee Health Protocol.
- I. Diphenhydramine (50 mg. po or 50 mg. IM) per Allergic Reaction Employee Health Protocol.
- J. Hand sanitizer.

III. Information, Consent and Declination of the Vaccine Series by Employees

- A. Employees shall be provided with the Hepatitis B VIS. Employees shall be given an opportunity to ask questions prior to receiving or declining the vaccine.
- B. Employees who decline the vaccine and complete a DOC-3458 Employee Hepatitis B Vaccine Status may at a later date request and receive the series.
- C. After requesting the vaccine the employee shall complete the DOC-3369 Employee Medical History (Hepatitis Vaccine), the DOC-3368 – Employee

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Hepatitis B Vaccine Consent and be provided with the Hepatitis B VIS with every injection.

IV. Determining Contraindications to Vaccine Administration

- A. Contraindications to receiving the vaccine are:
 - 1. Known allergy to yeast.
 - 2. Allergic reaction to a previous dose of Hepatitis B vaccine or any component.
- B. Those with moderate or severe acute illness should not be vaccinated until their condition improves.
- C. Minor illnesses such as an upper respiratory tract illness are not contraindications.
- D. Women reporting that they are pregnant or breastfeeding shall not receive the Hepatitis B vaccine from Employee Health unless they provide a clearance from their private practitioner.

V. Vaccination Schedule

- A. Provided there are no contraindications, the Hepatitis B series will be administered per the vaccination schedule.
- B. The Hepatitis B series consists of three IM injections given according to the following schedule: day 0, one month and six months.
- C. There must be at least 28 days between the first and second injection, two months between the second and third injections and at least six months between the first and third injections.

VI. Hepatitis B Titers for DOC Health Care Workers

- A. Health Care Workers, who have received the Hepatitis B Vaccination series through the DOC shall be informed that immunity titer (surface antibody) testing is available at no cost to the employee when testing done through the Bureau of Health Services.
- B. Health care providers requesting a titer shall contact the EHN 4-8 weeks after completing the series.
- C. The EHN will arrange for the immunity titer test to be drawn through the employing HSU. HSU will provide the employee with the lab requisition indicating the correct employee health account.
- D. The HSU shall draw the blood and send it to the current contracted lab. On the lab requisition the employee writes their own address and the results are sent directly to the employee.

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- E. Results of the titer shall be provided to the EHN by the employee.
 - 1. If not immune, the employee is eligible for a second series of Hepatitis B vaccine.
 - 2. The immunity titer shall be repeated after the second series.
 - 3. If the second titer is negative, the employee is designated as a nonconverter and no further Hepatitis B vaccine will be given by Employee Health.

VII. Hepatitis B Titers for DOC Non-Health Care Workers

- A. Non-health care workers employed by the DOC who receive the Hepatitis B vaccine may choose to get an immunity titer through their own health care provider at their own expense within 4-8 weeks of completion of the series.
- B. If not immune, the employee is eligible for a second series of Hepatitis B vaccine. The Hepatitis B vaccine can be administered to the employee by the DOC EHN at no cost to the employee.
- C. The employee's personal ACP shall provide a written prescription and the employee's titer results to the EHN in order for the employee to receive a second Hepatitis B vaccine series through the DOC.
- D. The employee may choose to have a second immunity titer through their personal ACP at their own expense.
- E. If the second titer is negative, the employee is designated as a non-converter.
- F. Two series of Hepatitis B vaccines will be provided by the DOC.

VIII. Assistance from Institution Staff for the Vaccination Program for Employees

- A. Facilitate employee health clinics at the facility and office level and provide EHN with updated lists of employees.
- B. Ensure availability of employees for vaccination by EHN.
- C. Provide private area for vaccination of employees with consideration for infection control.

IX. Protocols and consultation Regarding Medical Issues Shall be Provided by the BHS Medical Director.

X. Employee Health Nurse Shall:

- A. Review documentation of medical history as provided on Doc-3369.
- B. Provide and explain the CDC Hepatitis B Vaccine Information Sheet and obtain signed declinations or consents.

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- C. Provide information on Hepatitis B vaccine to employees and other staff as needed.
- D. Administer vaccine per protocol.
- E. Maintain documentation of medical history, vaccinations and declinations.

| Bureau of Health Services: | | Date Signed: |
|-----------------------------------|---------------------------------|--------------|
| | James Greer, Director | |
| | | Date Signed: |
| | Paul Bekx, MD, Medical Director | |
| | | Date Signed: |
| | Mary Muse, Nursing Director | |
| Administrator's Approva | l: | Date Signed: |
| | Iames Schwochert Administrate | $\circ r$ |

DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES

| Facility: Name | | | | |
|---|------------------------------|--------------------|--|--|
| Original Effective Date: | DAI Policy Number: 500.20.02 | Page 7 of 7 | | |
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| | | 11/28/12 | | |
| Chapter: 500 Health Services | | | | |
| Subject: Employee Hepatitis B Vaccination Program | | | | |
| Will Implement As written With below procedures for facility implementation | | | | |
| Warden's/Center Superintendent's Approval: | | | | |

REFERENCES

DEFINITIONS, ACRONYMS AND FORMS

FACILITY PROCEDURE

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a.

b.

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II.

III.

RESPONSIBILITY

- I. Staff
- II. Inmate
- III. Other